UNIVERSITY OF WISCONSIN-WHITEWATER
Honors Option Contract (Form 2)

Due on or before May 4th, 2015 to the University Honors Program Office, Andersen Library 2115

Term: ______________________________________

Student's Name: ___________________________________________ ID #: __________________________

Phone Number: ___________________________________________ E-Mail: ____________________________

UWW cumulative GPA: __________ Anticipated Graduation Month & Year: ____________________________________________

Instructor's Name: ___________________________________________ Phone Number: __________________________

Department Name and Course Number (e.g. GenEd 110): ________________________________________________

Class Number (4 digits): ___________ Section: ____________ Credits for Course: ___________________________

Name of the Course (e.g. World of the Arts): _____________________________________________________________________________________________

Student Self-Assessment (Please type out your responses for Questions 1-3 below on a separate sheet of paper and attach it to this form. Please check the desired option for Question 4.)

1. Provide a detailed summary of your H-Option project (100 words or fewer).

2. In a few paragraphs, please explain the enrichment you gained by completing this H-Option (development of critical thinking ability, application of coursework, etc.).

3. Now that you have completed this H-Option, what would you have done differently? (In other words, if another student were to do this same project, what advice would you give them?) Please explain in a few paragraphs.

4. To help other Honors students and faculty get ideas for H-Option projects, would you be willing (if requested) to share a summary of your H-Option project (Question 1 above) in an online posting or with other students and/or faculty either in a face-to-face setting?

   ____ Yes, post my summary to the Honors website.
   ____ Yes, I will share in a face-to-face setting.
   ____ No, I decline either option.

Satisfactory Completion of Honors Option Work

By signing this form, I certify that the above named student’s work was of a satisfactory level and that the student has met the professor’s attendance and other course requirements. The student will be ineligible to receive Honors Credit for this course if his/her final course grade is lower than a B.

Student's Signature ___________________________________________ Date ___________________________

Instructor's Signature ___________________________________________ Date ___________________________

Approval

Honors Director’s Signature ___________________________________________ Date ___________________________

rev. 11 Feb 2015